FORM DMB 529 (1/80) STATE OF MICHIGAN Department of Management & Budget Office Services Division

## INTER-DEPARTMENTAL MAILING RECEIPT

	DEPARTMENT	ADDRESS	PERSON	
MAILED TO	DIVISION			<b>A</b>
MAILED FROM	DEPARTMENT	ADDRESS	PER IM	
	DIVISION			
DESCRIPTION OF	TITEM:		NUMBER OF PIEC	ES
White - Return		CERTIFIC	CATION OF RECEIPT & DELIVERY	
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NOTE: The use of this form is restricted to those items which have a substantial monetary value, or a receipt is required as a matter of record.